

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | AN | | 11-16-01 |
| O.I.P.E. CLASSIFIER | | 12 | 12-06-01 |
| FORMALITY REVIEW | Ch | 1115 | |
| RESPONSE FORMALITY REVIEW | AG | 640 | 5-3-02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 II Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 - Restricted O Objected

| Claim | Date |
|----------------|----------|
| Final Original | |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

3500 05/03/02